



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IAP6 Rec'd PCT/PTO 12 FEB 2007

In re the Application of:

Danuta CIOK et al.

Group Art Unit: 3761

Serial No.: 10/541,823

Examiner: Hand, Melanie Jo

Filed: July 11, 2005

For: OSTOMY APPLIANCE

TRANSMITTAL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an **Amendment** for filing in the above-captioned patent application.

The fee has been calculated as shown below:

	Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra		Small Entity Rate Additional Fee	(or)	Other Than Small Entity Rate Additional Fee
Total Claims	15	- 20 =	0	x 25 =	\$	x 50 =	\$
Ind. Claims	4	- 3 =	1	x100 =	\$	x200 =	\$200.00
[] Multiple Dependent Claims				+180 =	\$	+360 =	\$
				Total	\$	Total	\$200.00

XXXX A credit card payment form in the amount of **\$650.00** is attached for: **Petition for 2-month Extension of Time and Extra claims**

XXXX If a Petition for Extension of Time is necessary and the Petition and/or the credit card payment form is not enclosed, this will act as the Petition and applicant herewith petitions the Commissioner to extend the time for response and charge any fees necessary under 37 CFR 1.17 (a)(1)-(5) to Deposit Account No. 06-1358. The Commissioner is also authorized to charge payment of any other additional fees associated with this communication or credit any overpayment to Deposit Account No. 06-1358. A duplicate copy of this sheet is attached.

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Respectfully submitted,

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